MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4476 Telephone: (916) 445-2021 ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA.

Sections 12586 and 12587, California Government Gode 11 Cal. Gode Regs. sections 301-307, 311 and 312

WEB SITE ADDRESS; http://ag.ca.gov/charities/ Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$300, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

RECEIVED
Attorney General's Offico

as defined in determinent dead section 12000. It into se	~~~~~~		<u> 1</u>			
State Charity Registration Number: CT 2995924			MAY 28 2011			
	Change of address		Registry of Charitable Trusts			
LOS ANGELES SMALL SCHOOLS CENTER		ended report				
350 S. BIXEL STREET, NO. 100 Corporate or Organization No. 2995924						
Address (Number and Street) LOS ANGELES, CA 90017 Federal Employer I.D. No. 26-0326342 Dity or Town, State and ZIP Code				2		
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Make Check Payable to Attorney General's R			7, 311 and 312)			
Gross Annual Revenue Fee Gross Annual Revenue	Fee	Gross Annual Re	evenue	Fe	<u>e</u>	
1 ==== 1					\$150 \$225 \$300	
PART A - ACTIVITIES						
For your most recent full accounting period (beginning 07/01/20 Gross annual revenue \$ 1,186,431. Total assets \$	11 end	ling <u>06/30/2</u> 88 <mark>6,466.</mark>	2012_) list:			
PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD	OF THIS RE	EPORT				
Note: If you answer "yes" to any of the questions below, you must attach a s and details for each "yes" response. Please review RRF-1 instructions	eparate sh	eet providing an ex	planation			
				Yes	No	
During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?					x	
During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?					х	
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?					х	
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.					х	
 During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider. 					х	
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number. SEE STATEMENT 7					<u> </u>	
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.					X	
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.					x	
Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?						
Organization's area code and telephone number 213-250-1200						
Organization's e-mail address JFAUCI@LASMALLSCHOOLSCENTER	ORG					
I declare under penalty of perjury that I have examined this report, including accompanying correct and complete	ng document	s, and to the best of n	ny knowledge and bel	ief, it is tr	ue,	
parme the JEANNE FAUCI		EXECUTIVE	DIRECTOR 4	,/14/	13	
Reparture of authorized officer Printed Name		itle		L∎ate - I		

RRF-1 (3-05)

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FORM RRF-1 INFORMATION REGARDING GOVERNMENT FUNDING PART B, LINE 6

STATEMENT

UCLA SUBAWARD NO. 0070 G MD242. UCLA GSE&IS BOX 951521, 1320 MOORE HALL. LOS ANGELES, CA 90095-1521. KARLA BREEN. 310-825-0862